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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/585,293			ing Date 14/2009	To be Mailed	
	AF	PPLICATION	AS FILE	OTHER THA									
FOR			NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1 16(a), (b), (or (c))	N/A		N/A		ı	N/A		1	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i), o	or (m))	N/A		N/A		ı	N/A		1	N/A		
	EXAMINATION FE (37 CFR 1 16(o), (p),		N/A		N/A			N/A]	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		П	x \$ =		OR	x s =		
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =			•		X \$ =		1	X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity additional 50 sheets or fractic 35 U.S.C. 41(a)(1)(G) and 37			n size fee due for each n thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	01/24/2011	CLAIMS REMAINING AFTER AMENDMENT		NUMBE PREVIO PAID FO	R	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	* 15	Minus	20		= 0	П	x s =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 2	Minus	3		- 0	П	X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))												
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16()))		Minus	**		-	П	X \$ =		OR	x s =		
	Independent (37 CFR 1 16(h))		Minus	***		-	ı	X \$ =		OR	x s =		
Ξ	Application Size Fee (37 CFR 1.16(s))						ı]			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
										OR	TOTAL ADD'L FEE		
*** It	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For "N THIS SPACE" is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 39 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application from the USPTO. Time will way depending upon the individual case, Any comments or amount of time you require to complete first form and/or suggestions for reducing this factors, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Disk 1470, Alexandria, V.S.231-4450, D.O. NOT SEND FEES OR LOWNELEET DOTAINS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.